

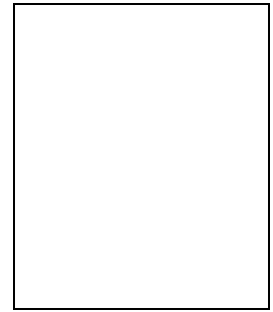


**AL-SHIFA SCHOOL OF PUBLIC HEALTH
PAKISTAN INSTITUTE OF OPHTHALMOLOGY
AL-SHIFA TRUST, RAWALPINDI**



Form No. _____

Photograph



APPLICATION FORM

BS (PH) Programme

Al-Shifa School of Public Health

Al-Shifa Trust Eye Hospital, Jhelum Road, Rawalpindi

Tel: 051-5487820-24; <http://sofph.alshifaeye.org/>

SEMESTER SPRING/FALL 20____

2. SECTION 2: ADDITIONAL SKILLS

Please note that the following questions are NOT part of our selection criteria for the first phase of short-listing; however please note that the Al-Shifa School of Public Health, PIO will be interested to know about these skills in the interviews after the first phase is complete.

ENGLISH LANGUAGE SKILLS

How do you rate your English language skills?

	POOR	FAIR	GOOD	EXCELLENT
SPEAKING				
WRITING				

How do you rate your computer skills?

	POOR	FAIR	GOOD	EXCELLENT
MICROSOFT WORD				
MICROSOFT POWER POINT				
MICROSOFT EXCEL				

ANY OTHER SOFTWARE (SPECIFY)

3. SECTION 3: QUALIFICATIONS

List all the School & Colleges attended in reverse chronological order. Begin with the most recent.

NAME OF INSTITUTION	PLACE, COUNTRY	DATES ATTENDED		DEGREE NAME	PASSING YEAR	MARKS OBTAINED	TOTAL MARKS
		FROM	TO				

4. SECTION 4: SIGNATURE FORM

If you are offered admission to the BSPH Course, how do you plan to pay for it?

EMPLOYER: _____ SELF: _____ OTHER (SPECIFY): _____

PAYMENT SCHEDULE

LUMP SUM _____ SEMESTER WISE _____

I affirm that the information on this application form and any additional material that I submit is complete and accurate to the best of my knowledge. I understand that furnishing false or incomplete information may be cause for denial of admission, cancellation of registration, or revocation of degree.

APPLICANT'S SIGNATURE: _____ DATE: _____

NOTE: All applicants are required to send:

1. Complete filled application form handwritten or typed.
2. Two complete ATTESTED/VERIFIED sets of all documents (Last Degrees must be verified, Domicile, ID Card, 2 passport size photos)
3. Application processing fee of Rs. 2,000/- (non- refundable) in the form of pay order or bank draft made to "Al-Shifa Trust Eye Hospital, Rawalpindi"
4. Can be submitted in person or through TCS/Courier services at the address given below:

BS (PH) Admission,
Al-Shifa School of Public Health,
Pakistan Institute of Ophthalmology,
Al Shifa Trust Eye Hospital,
Jhelum Road, Rawalpindi.